U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0168
Expires 11-30-2008

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

7/11/05	READ THE INSTR	UCTIONS CAREFULLY	BEFORE PREPARING THIS REPO	RT.	
1. File Number U - 2599			Fiscal Year Covered From:		
			1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.			Name, file number, and address of	labor organization.	
Name Dennis J Cook			Chicago Regional	Council of Carpenters	
		(	abor Organization File Number	001-949	
P.O. Box, Bidg., Room No., if any			P.O. Box, Building and Room Number, if any		
Street 15436 Natalie Dr.			Street 12 E. Erie Street	المنظمة المنظم - المنظمة	
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Name of Person Filing Dennis Cook	File Number U- 2599					
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.						
8. Name and address of Business (including trade name, if any).	9. Business deals with:					
Name Whitfield & McGann	57)					
Trade Name, If any:	a. Labor Organization					
P.O. Box, Bldg., Room No., If any Suite 1601	b. Trust  c. Employer					
Street 2 N. LaSalle St.	hamel of an area of					
City Chicago						
State Illinois ZIP Code+4 60602						
10, if 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.  Christmas ham plus shipping					
Name	Car Incines was bigs suitbbrid					
Trade Name, if any:						
P.O. Box, Bldg., Room No., If any						
Street Landing and Control Con	11.b. Approximate dollar value of such dealing. \$70					
City    City	12.a, Nature of interest held or income received.					
State ZIP Code + 4						
	12.b, Amount,					
C. Received from any employer (other than an employer covered under parts A and B above)						
or from any labor relations consultant to an employer any payment of money or other thing of value.						
والمصادع فالمصاد والمسام والماسو						
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.					
(including trade name, if any).						
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(Including trade name, if any).  Name  Trade Name, if any:						
(Including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any						
(Including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street						